

**TOWN OF DAVIE
TOWN COUNCIL AGENDA REPORT**

TO: Mayor and Councilmembers

FROM/PHONE: Barbara Dupre' (954) 797-1100

PREPARED BY: Barbara Dupre'

SUBJECT: Resolution Health Insurance Renewal

AFFECTED DISTRICT: Townwide

ITEM REQUEST: **Schedule for Council Meeting**

TITLE OF AGENDA ITEM: INSURANCE - A RESOLUTION OF THE TOWN OF DAVIE TO APPROVE THE SELECTED CARRIER TO PROVIDE HEALTH INSURANCE COVERAGE TO ALL TOWN OF DAVIE EMPLOYEES, TO AUTHORIZE THE HUMAN RESOURCES DIRECTOR TO EXECUTE APPROPRIATE APPLICATIONS AND CONTRACTS FOR SAID BENEFITS, AND TO PROVIDE FOR AN EFFECTIVE DATE.

REPORT IN BRIEF: This resolution is done in order to approve the 2010 Health Insurance Carrier to provide health insurance to all full time Town of Davie employees. Staff is recommending that the Town Council continue to use United Health Care as its Third Party Administrator in administering our self insured health insurance program.

Pursuant to direction by Council, the Town, through its agent of record, sent out a Request For Proposal in order to select a Health Insurance Provider beginning in January 2010. The Town received submissions back from United, Blue Cross/Blue Shield, AETNA, and AVMED. After a thorough review by both the Bid Spec Committee as well as our agent of record, Sapoznik Insurance, it was recommended that the Town of Davie continue with its incumbant carrier, United Health Care. This recommendation is based on a variety of business and economic considerations including fee analysis, and the disruption of service that would occur should another provider be selected. United offered the best renewal in terms of cost and results in no disruption of service to employees when considering the most utilized health care providers. In addition, the number of claims processing issues is extremely low and our customer service experience has been extremely positive. United has been an integral part of developing the Town's wellness initiative and continues to be a proactive partner in developing new programs and assisting us in controlling health care costs.

PREVIOUS ACTIONS: Not Applicable

CONCURRENCES: N/A

FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: Total Benefit costs for all Town employees will be approximately \$6 million dollars, an amount already included in the 2009-2010 approved budget.

Account name and number: Human Resources (Employee Benefits) Account/Self Insurance Fund

Additional Comments:

RECOMMENDATION(S): Motion to approve resolution

Attachment(s): Resolution

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, TO APPROVE UNITED HEALTH CARE TO CONTINUE AS THE HEALTH CARE THIRD PARTY ADMINISTRATOR BEGINNING JANUARY 2010, AND AUTHORIZING THE HUMAN RESOURCES DIRECTOR TO EXECUTE APPROPRIATE APPLICATIONS AND CONTRACTS FOR SAID BENEFIT PLANS.

WHEREAS, the Town of Davie wishes to have United Health Care

continue as its Health Insurance Provider/Third Party Administrator, and

WHEREAS, the Town of Davie has solicited proposals for group health insurance for all full time Town employees and eligible participants; and

WHEREAS, after a review of the proposals it was determined that the Town should continue with United based on a fee analysis and disruption of service analysis, and

WHEREAS, it is in the Town's best interest to execute appropriate applications and contracts for said benefits.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept United Health Care to continue as its Health Insurance Provider beginning in January of 2010, and

SECTION 2. The Town Council of the Town of Davie does hereby authorize the Human Resources Director to execute appropriate applications and contracts for said benefits. The Town Council of the Town of Davie does hereby authorize said renewals, allowable by ordinance, to be handled administratively by staff, if appropriate, subject to budgetary approval by Council.

SECTION 3. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____, 2009.

MAYOR/COUNCILMEMBER

ATTEST:

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2009.